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OCT 09 2001

2001

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

3325/34

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	72	minus 20 = * 52
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 = * 0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEES
	\$ _____
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL _____	

RATE	FEES
	\$ 710
x \$ 18 =	936
x 80 =	0
+ _____ =	
TOTAL 1646	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 79	Minus	** 72 = 7
	Independent (37 CFR 1.16(b))	* 3	Minus	*** 3 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL _____	

RATE	ADDI- TIONAL FEE
x \$ 18 =	126
x 84 =	0
+ _____ =	
TOTAL ADDIT. FEE 126	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus	** =
	Independent (37 CFR 1.16(b))	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

(Column 1)	(Column 2)	(Column 3)	ADDITIONAL FEE
x \$ _____ =			
x _____ =			
+ _____ =			
TOTAL _____		ADDITIONAL FEE _____	

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL ADDIT. FEE _____	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus	** =
	Independent (37 CFR 1.16(b))	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL ADDIT. FEE _____	

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL ADDIT. FEE _____	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.